



Operational Status Report

Kentucky MMIS Project

*Cabinet for Health and Family Services
Department for Medicaid Services*

Status Month End February 2014

Cabinet for Health and Family Services Department for Medicaid Services

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1 Executive Summary

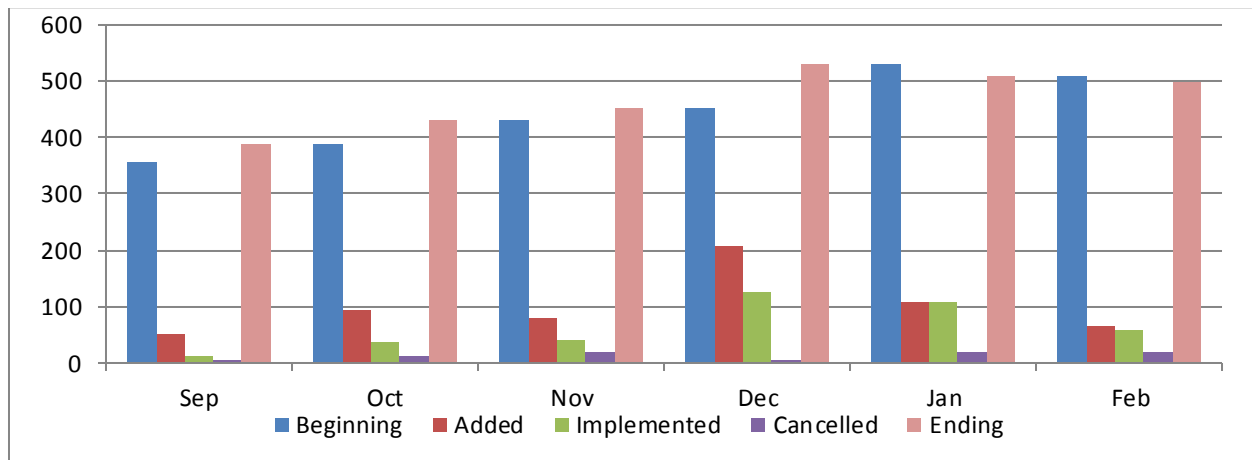
	February 2014	Page Number
Claims Processed	691,094	Page 16
Total Dollars Paid	\$193,977,077.58	Page 16
Claims Paid	461,048	Page 16
Claims Denied	230,046	Page 16
% Denied Claims	33.3%	Page 16
Average Claims Held in Cash Management	263,374	N/A
Average Dollars Held in Cash Management	\$52,115,768.27	N/A
Capitation Financial Transactions	2,759,302	Page 17
Capitation Financial Payments	\$449,829,328.82	Page 17
Suspended Claims	12,023	Page 23
Total Suspended Claims > 90 Days	525	Page 23
Provider Services Calls Received	11,286	Page 29
Provider Services Current Service Level %	96%	Page 29

1.1 Encounter Load Statistics

Managed Care Organizations (MCOs)						
	September 2013	October 2013	November 2013	December 2013	January 2014	February 2014
Coventry	765,938	736,282	1,218,510	961,113	788,742	797,818
Humana	22,042	28,730	47,394	25,760	27,040	82,022
Kentucky Spirit	36,548	25,879	54,582	68,019	16,107	6,676
Passport (R03)	14,745	16,158	84,634	69,115	2,617	1,999
Passport R31	473,004	397,921	505,918	472,910	747,576	539,834
WellCare	1,525,855	1,845,428	1,931,751	1,146,425	1,138,675	1,325,299
Anthem	0*	0*	0*	0*	0*	0*
Other						
Transportation Encounters	204,089	15,000	314,723	606,347	0*	406,862
Magellan Pharmacy Claims	237,406	403,317	274,801	265,092	268,579	276,021
Totals	3,279,627	3,468,715	4,432,313	3,614,781	2,989,336	3,436,531
Decrease in Transportation Encounters due to a delay in corrected resubmitted files and this is expected to be elevated in the coming month. There are file ready for submission in Nov.						
* Transportation Encounters have NOT been received from the Transportation Cabinet in January 2014.						
* Anthem – No files yet received						

1.2 Change Order and Defect Statistics

Change Orders / Defects Inventory	Sep	Oct	Nov	Dec	Jan	Feb
Beginning	355	388	432	452	531	510
Added	52	93	80	208	108	66
Implemented	14	38	41	124	109	60
Cancelled	5	11	19	5	20	19
Ending	388	432	452	531	510	497



February 2014	Change Orders		Defects		Total	Comments
	Open	On Hold	Open	On Hold		
DMS Priority	68	37	2	1	108	
Federally Mandated	193	1	0	0	194	25 open and 1 on hold COs are included on the Priority list.
Non-Priority	115	12	67	1	195	
Totals	376	50	69	2	497	Total includes 166 ICD-10 and T-MSIS CO's

The priority list consists of 153 Change Orders & Defects.

	Change Orders			Defects		
February 2014	Added	Implemented	Cancelled	Added	Implemented	Cancelled
DMS Priority	33	16	9	6	1	1
Federally Mandated	3	27	0	0	1	0
Non-Priority	15	8	7	9	7	2
Totals	51	51	16	15	9	3

2 Unplanned System Outages

A Breakdown Of The Downtime		
Date	Time	Reason For Downtime
		There were no unplanned system outages during the month of February.

3 Billable Hours

3.1 Billable Hours Usage Summary (Contract Year 2014)

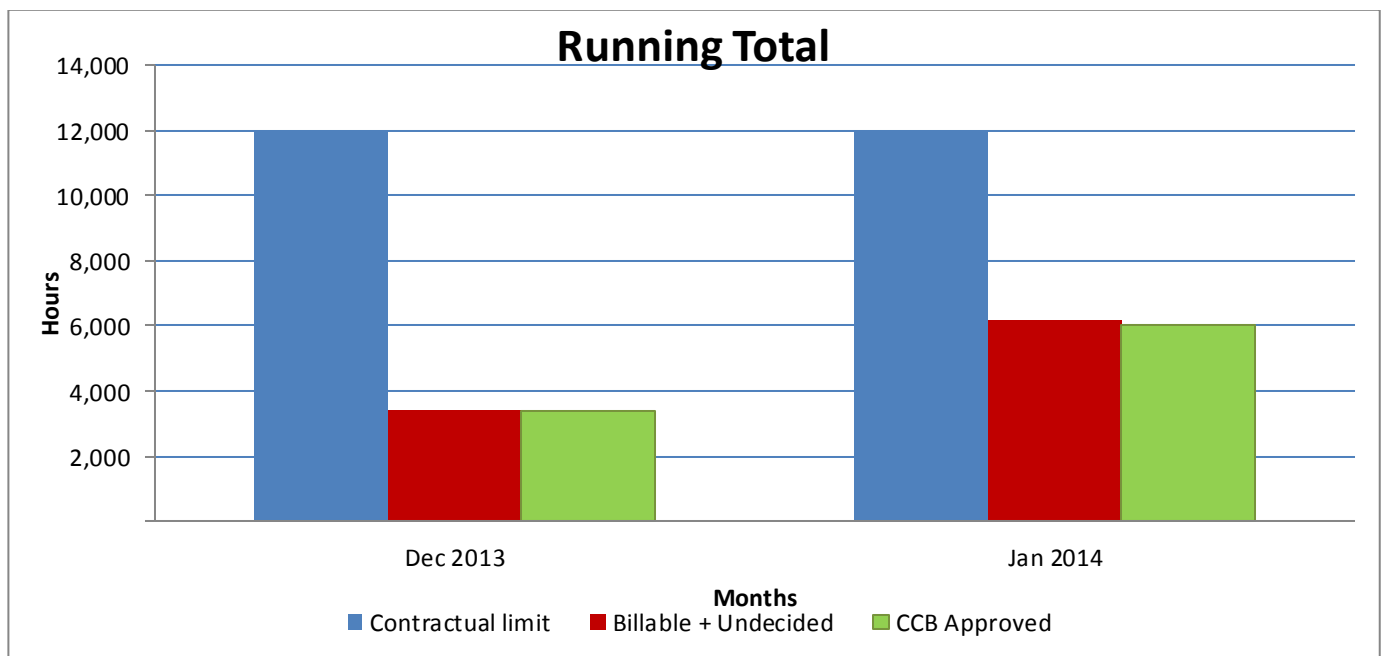
Month	Billable	Undecided	CCB Approved	Need CCB Review
Dec 2013	3,401.75	48.00	3,392.25	57.50
Jan 2014	2,663.00	73.25	2,614.25	122.00
Feb 2014				
Mar 2014				
Apr 2014				
May 2014				
Jun 2014				
Jul 2014				
Aug 2014				
Sep 2014				
Oct 2014				
Nov 2014				

* Time entry is finalized on the 22nd day of the following month.

3.2 Running Total (Contract Year 2014)

Month	Contractual limit	Billable + Undecided	CCB Approved	Billable	Undecided	Need CCB Review
Dec 2013	12,000.00	3,449.75	3,392.25	3,401.75	48.00	57.50
Jan 2014	12,000.00	6,186.00	6,006.50	6,064.75	121.25	179.50
Feb 2014						
Mar 2014						
Apr 2014						
May 2014						
Jun 2014						
Jul 2014						
Aug 2014						
Sep 2014						
Oct 2014						
Nov 2014						

* Time entry is finalized on the 22nd day of the following month.



4 Monthly Ad hoc Requests

4.1 Inventory Summary

	Beginning of Month	Received This Month	Closed This Month	DMS Hold	Ending Inventory
Type A	0	0	0	0	0
Type B	0	0	0	0	0
Type C	1	7	8	0	0
Type D	0	0	0	0	0
Type E	0	0	0	0	0
Total	1	7	8	0	0

4.2 Inventory Detail

CO #	Type	Requested By	Status	Date Requested	Date Completed	Description
21487	C	Jenkins, Ericka	Completed	20140128	20140211	State of the States
21540	C	Moccia, Don	Completed	20140205	20140211	Apr 2014 MCO Risk Adjusted Rates -Feb 1 Enrollment
21566	C	Dennis, David	Completed	20140210	20140211	Norton 340B
21576	C	Wang, Julia	Completed	20140212	20140213	Kaleidoscope 11012012-12312013
21577	C	Wang, Julia	Completed	20140212	20140213	Seven Counties 11012012-12312013
21578	C	Wang, Julia	Completed	20140212	20140213	Path Forward 01012013-12312013
21607	C	Devore, Harriet	Completed	20140218	20140225	TPL adhoc on fixed claims data

CO #	Type	Requested By	Status	Date Requested	Date Completed	Description
21643	C	Virmani, Ashish	Completed	20140220	20140221	Rerun 21367 and 21368

Type A – completed correctly within twenty-four (24) hours of receipt

Type B – completed correctly and delivered within forty-eight (48) hours of request

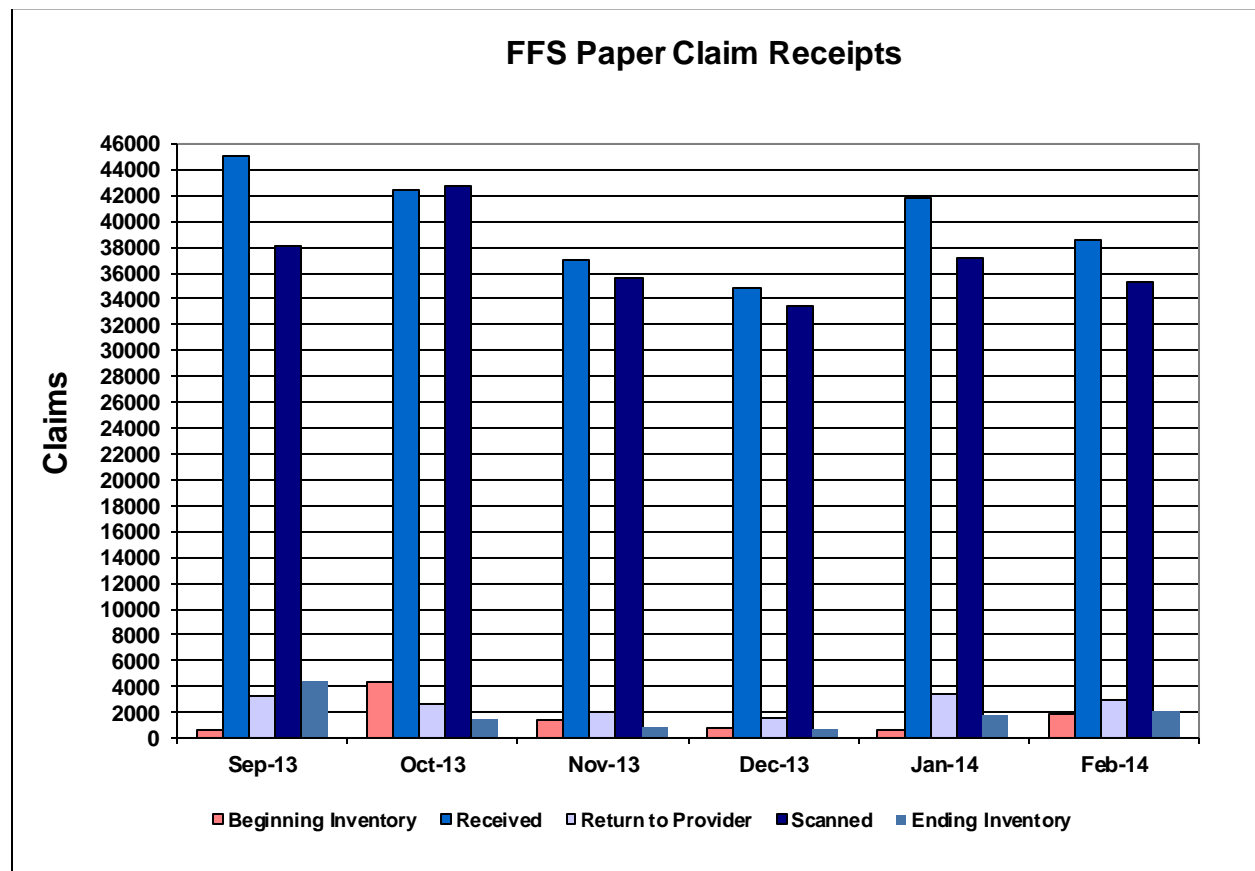
Type C – completed correctly and delivered within seven (7) business days of request

Type D – completed correctly and delivered within time frame established by DMS (greater than seven (7) business days)

Type E – Emergency reports completed correctly within two (2) hours of submitted request.

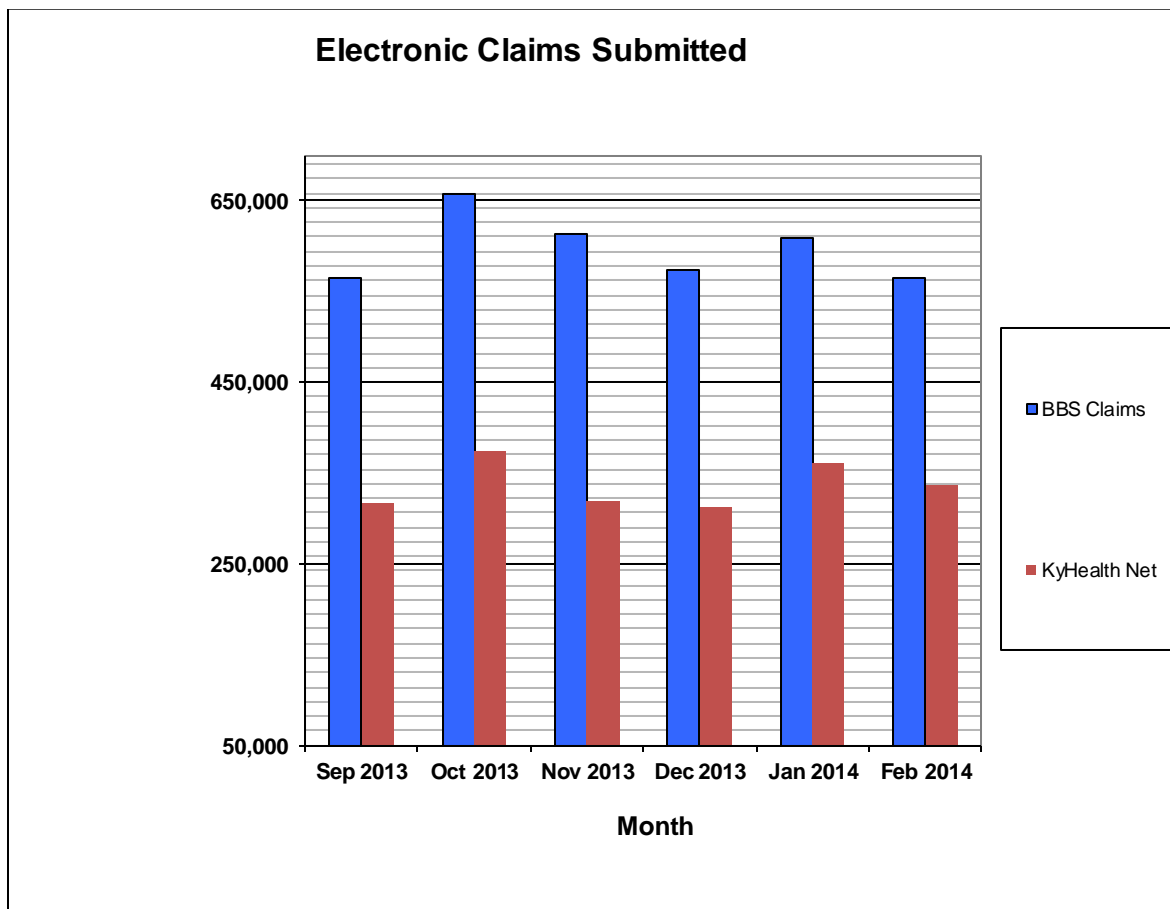
5 FFS Paper Claim Receipt Statistics

Mailroom	Beginning Inventory	Received	RTP	Scanned	Ending Inventory	Oldest Claim
September 2013	669	45,008	3,206	38,062	4,409	0 days
October 2013	4,409	42,427	2,652	42,701	1,483	0 days
November 2013	1,483	37,013	2,004	35,636	856	0 days
December 2013	856	34,798	1,551	33,424	679	0 days
January 2014	679	41,800	3,423	37,208	1,848	0 days
February 2014	1,848	38,550	2,994	35,371	2,033	0 days



6 Electronic Claim Submissions

	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014
Bulletin Board Claims Submitted	563,843	657,634	612,321	574,352	607,864	564,399
KyHealth Net Claims Submitted	317,585	374,692	318,818	311,971	361,265	336,665



7 Monthly FFS Claim Totals by Media

	Denied	PAID	Suspended
	Billed Amount	Paid Amount	Billed Amount
Electronic	\$703,095,257.19	\$167,211,538.91	\$14,684,049.31
Paper	\$49,511,657.81	\$26,765,538.67	\$11,417,925.07
Total	\$752,606,915.00	\$193,977,077.58	\$26,101,974.38

8 Monthly Claims Operations

8.1 FFS Monthly Financial Cycle Summary

Category	September 2013	October 2013	November 2013	December 2013	January 2014	February 2014
Paid Claims	446,264	456,714	605,447	459,040	531,560	461,048
Denied Claims	235,852	241,770	291,852	212,996	283,172	230,046
Total Adjudicated Claims	682,116	698,484	897,299	672,036	814,732	691,094
Adjustments	12,363	10,059	13,292	10,104	11,770	12,573
Total Claims	694,479	708,543	910,591	682,140	826,502	703,667
Suspended/Re-suspended Claims	11,788	15,296	12,811	11,094	8,907	12,023
% of Denied Claims	34.6%	34.6%	32.5%	31.7%	34.8%	33.3%
Avg \$ per Claim	\$405.57	\$430.47	\$361.62	\$406.61	\$396.79	\$420.73
Claim Payment Amount	\$180,991,079.99	\$196,601,602.10	\$218,939,387.67	\$186,650,101.31	\$210,919,296.23	\$193,977,077.58
(+) Payouts	\$736,0754.51	\$1,183,572.44	\$7,360,754.51	\$48,295,830.15	\$5,634,150.15	\$1,556,172.01
(-) Recoupments	-\$3,956,438.25	-\$2,114,267.87	-\$4,091,631.89	-\$3,143,502.06	-\$5,181,714.36	-\$3,562,145.03
Check Issue	\$184,395,396.25	\$195,670,906.67	\$222,208,510.29	\$231,802,429.40	\$211,371,732.02	\$191,971,104.56
Capitation Payment	\$296,300,082.33	\$293,880,283.67	\$298,568,215.45	\$340,218,916.61	\$404,400,954.77	\$449,829,328.82
Total Paid	\$480,695,478.58	\$489,551,190.34	\$520,776,725.74	\$572,021,346.01	\$615,772,686.79	\$641,800,433.38

Note: Claim Payment Amount divided by Paid Claims = Avg \$ per Claim

Total Denied Claims divided by Total Adjudicated Claims = % of Denied Claims

Category	September 2012	October 2012	November 2012	December 2012	January 2013	February 2013
Paid Claims	458,763	482,206	516,497	430,573	411,690	401,052
Denied Claims	227,040	235,967	272,168	211,360	224,897	222,210
Total Adjudicated Claims	685,803	718,173	788,665	641,933	636,587	623,262
Adjustments/Claim Credits	11,364	13,578	20,314	13,370	23,748	13,533
Total Claims	697,167	731,751	808,979	655,303	660,335	636,795
Suspended/Resuspended Claims	10,887	6,123	12,402	7,657	6,716	9,978
% of Denied Claims	33.1%	32.9%	34.5%	32.9%	35.3%	35.7%
Avg \$ per Claim	\$406.50	\$383.86	\$388.10	\$409.78	\$416.06	\$416.15
Claim Payment Amount	186,489,410.60	\$185,098,986.97	\$200,454,913.45	\$176,441,820.39	\$171,289,507.73	\$166,896,626.03
(+) Payouts	10,837,205.60	\$11,434,655.39	\$15,158,699.92	\$20,395,641.89	\$13,932,014.73	\$4,470,908.48
(-) Recoupments	-\$4,203,957.52	-\$3,956,441.49	-\$16,740,078.98	-\$3,671,832.72	-\$14,489,814.12	-\$3,767,303.55
Check Issue	193,122,658.68	\$192,577,200.87	\$198,873,534.39	\$193,165,629.56	\$170,731,708.34	\$167,600,230.96
Capitation Payment	267,562,420.68	\$263,829,923.16	\$200,063,776.80	\$274,936,052.83	\$271,418,422.81	\$289,741,510.16
Total Paid	460,685,079.36	\$456,407,124.03	\$398,937,311.19	\$468,101,682.39	\$442,150,131.15	\$457,341,741.12

Note: Claim Payment Amount divided by Paid Claims = Avg \$ per Claim

Total Denied Claims divided by Total Adjudicated Claims = % of Denied Claims

8.2 Monthly MCO & NEMT Capitations

Begin Date	End Date
2/1/2014	2/28/2014

MCO	Regular Capitations		Reconciliation (Recoup & Payout) Capitations		Totals	
	Count	Amount	Count	Amount	Count	Amount
Anthem	20,895	\$13,262,599.88	7,154	\$4,245,487.67	28,049	\$17,508,087.55
Coventry	285,270	\$112,557,669.22	38,872	\$14,225,829.87	324,142	\$126,783,499.09
Humana	43,710	\$23,104,381.40	11,772	\$6,351,222.58	55,482	\$29,455,603.98
NEMT	1,713,595	\$12,598,328.79	61,120	\$365,282.75	1,774,715	\$12,963,611.54
Passport	162,826	\$80,764,903.02	24,235	\$11,647,873.03	187,061	\$92,412,776.05
Wellcare	344,611	\$153,732,504.75	42,748	\$16,973,245.86	387,359	\$170,705,750.61
Sum	2,570,907	\$396,020,387.06	188,395	\$53,677,225.55	2,759,302	\$449,829,328.82

Begin Date	End Date
1/1/2014	1/31/2014

NEMT Broker	Count	Amount
AUDUBON AREA COMM SRVC	80,776	\$565,774.28
BLUE GRASS COMMUNITY ACTION AGENCY INC	111,110	\$743,997.60
FEDERATED TRANSPORTATION SERVICES OF THE BLUEGRASS	420,949	\$3,413,219.96
FEDERATED TRANSPORTATION SVS OF THE BLUE	85,507	\$609,701.03
LICKING VALLEY COMMUNITY ACTION PROGRAM INC	29,672	\$150,917.12
L.K.L.P. C.A.C., INC REGION 1	70,114	\$472,271.66
LKLP CAC INC REGION 11	330	-\$384.00
LKLP CAC INC REGION 15	95,155	\$484,295.68
L.K.L.P. C.A.C., INC REGION 4	92,034	\$658,728.00
LKLP CAC INC REGION 5	139,137	\$1,410,209.44
LKLP CAC INC REGION 9	126,475	\$878,801.00
LKLP COMMUNITY ACTION	143,001	\$922,303.79
PENNYRILE ALLIED COMSERVICES, INC	79,290	\$476,849.28
RURAL TRANSIT ENTERPRISES	203,591	\$1,526,235.65
SANDY VALLEY TRANSPORTATION	97,574	\$650,691.05
Sum:	1,774,715	\$12,963,611.54

8.3 FFS Adjudicated Original Claims (By Claim)

Paper Claims	September 2013	October 2013	November 2013	December 2013	January 2014	February 2014
Paid	10,357	11,300	14,939	8,618	9,538	10,541
Denied	15,095	13,246	14,889	12,048	15,248	12,846
Total	25,452	24,546	29,828	20,666	24,846	23,387
% of Total Adjudicated Claims	3.73%	3.51%	3.32%	3.08%	3.05%	3.38%
% of Paper Denied Claims	59.31%	53.96%	49.92%	58.30%	61.37%	54.93%

Note: Total Adjudicated Paper Claims divided by Total Adjudicated claims = % of Total Adjudicated claims
 Total Denied Paper Claims divided by Total Adjudicated Claims = % of Denied Claims

Electronic Claims	September 2013	October 2013	November 2013	December 2013	January 2014	February 2014
Paid	435,907	445,414	590,508	450,422	521,962	450,507
Denied	220,757	228,524	276,963	200,948	267,924	217,200
Total	656,664	673,938	867,471	651,370	789,886	667,707
% of Total Adjudicated Claims	96.27%	96.49%	96.68%	96.92%	96.95%	81.95%
% of Electronic Denied Claims	33.62%	33.91%	31.93%	30.85%	33.92%	32.53%

Note: Total Adjudicated Electronic Claims divided by Total Adjudicated claims = % of Total Adjudicated claims
 Total Denied electronic Claims divided by Total Adjudicated Claims = % of Denied Claims

8.4 Monthly FFS Top Ten Procedure Codes

Begin Date	End Date
2/1/2014	2/28/2014

Procedure	Description	Member Count	Claim Count	Amount Paid
S5108	HEMOCARE TRAIN PT 15 MIN	8,227	42,580	\$15,452,340.51
T2016	HABIL RES WAIVER PER DIEM	2,587	19,288	\$13,634,212.23
99199	SPECIAL SERVICE/PROC/REPORT	6,785	9,112	\$6,778,796.55
T2021	DAY HABIL WAIVER PER 15 MIN	4,713	25,812	\$4,821,612.99
T2022	CASE MANAGEMENT, PER MONTH	13,664	16,292	\$4,421,508.79
T2023	TARGETED CASE MGMT PER MONTH	8,360	9,563	\$2,799,833.70
H0004	ALCOHOL AND/OR DRUG SERVICES	2,747	6,873	\$2,480,673.32
97535	SELF CARE MNGMENT TRAINING	1,854	6,930	\$2,408,891.78
S5100	ADULT DAYCARE SERVICES 15MIN	2,627	17,382	\$2,314,024.63
H0043	SUPPORTED HOUSING, PER DIEM	549	3,716	\$1,584,045.30

8.5 Monthly FFS Top Ten Diagnosis Codes

Diagnosis	Description	Member Count	Claim Count	Amount Paid
317	MILD INTELLECT DISABILTY	4,266	28,845	\$11,838,746.80
3180	MOD INTELLECT DISABILITY	2,792	19,547	\$7,180,954.65
29690	EPISODIC MOOD DISORD NOS	1,229	2,695	\$7,161,871.74
3182	PROFND INTELLCT DISABILTY	558	2,040	\$6,663,882.64
3128	OTHER CONDUCT DISTURBANCE	3,606	3,763	\$6,453,018.18
3310	ALZHEIMER'S DISEASE	1,686	2,770	\$5,561,104.47
3181	SEV INTELLECT DISABILITY	796	4,732	\$4,844,458.87
318	OTHER MENTAL RETARDATION	2,229	10,524	\$4,110,206.40
496	CHR AIRWAY OBSTRUCT NEC	5,186	10,003	\$3,818,940.84
4019	HYPERTENSION NOS	4,741	8,426	\$3,772,133.83

8.6 Monthly MCO Top Ten Procedure Codes

Begin Date	End Date
2/1/2014	2/28/2014

Procedure	Description	Member Count	Claim Count	Amount Paid
99213	OFFICE/OUTPATIENT VISIT EST	115,718	155,895	\$6,102,087.98
99284	EMERGENCY DEPT VISIT	22,422	26,961	\$3,693,648.75
99283	EMERGENCY DEPT VISIT	33,158	41,198	\$3,550,170.95
T2022	CASE MANAGEMENT, PER MONTH	5,937	9,385	\$2,650,510.72
99214	OFFICE/OUTPATIENT VISIT EST	36,039	41,376	\$2,476,077.31
99285	EMERGENCY DEPT VISIT	10,201	12,402	\$2,196,574.59
A0120	NONER TRANSPORT MINI-BUS	8,739	159,404	\$2,101,520.75
A0130	NONER TRANSPORT WHEELCH VAN	3,744	74,035	\$2,054,695.31
A0100	NONEMERGENCY TRANSPORT TAXI	5,387	116,342	\$1,732,113.77
90832	PSYTX PT&/FAMILY 30 MINUTES	10,933	19,149	\$1,692,884.37

Note: Data taken from encounters received from the Managed Care Organizations

8.7 Monthly MCO Top Ten Diagnosis Codes

Diagnosis	Description	Member Count	Claim Count	Amount Paid
29690	EPISODIC MOOD DISORD NOS	3,759	10,104	\$3,480,771.38
V3000	SINGLE LB IN-HOSP W/O CS	1,951	2,699	\$3,122,127.96
31401	ATTN DEFICIT W HYPERACT	11,106	25,897	\$2,849,676.95
V3001	SINGLE LB IN-HOSP W CS	878	1,199	\$2,430,630.31
V202	ROUTIN CHILD HEALTH EXAM	19,844	21,629	\$1,853,203.06
0389	SEPTICEMIA NOS	288	454	\$1,808,365.87
486	PNEUMONIA, ORGANISM NOS	2,717	4,407	\$1,635,867.56
65421	PREV C-DELIVERY-DELIVRD	652	957	\$1,559,301.14
31381	OPPOSITION DEFIANT DISOR	2,092	7,017	\$1,462,180.43
78650	CHEST PAIN NOS	6,379	9,619	\$1,452,534.98

Note: Data taken from encounters received from the Managed Care Organizations

8.8 Monthly FFS Top Ten Denial Reasons (By Detail Line)

Error	Description	Number of Denials	% of Top Ten
2017	Services Covered Under Member's MCO Plan	18,742	17.0%
1010	Rendering Provider Not A Mem Of Billing Grp	18,414	16.7%
4021	No Coverage for Billed Procedure	15,932	14.5%
5001	Exact Duplicate	11,176	10.2%
4804	No Contract for Billed Rev Code	9,144	8.3%
3317	This Service Was Not Approved by Medicare	8,974	8.2%
1955	Cannot Determine Medicaid Nbr Billing Prov	8,620	7.8%
2003	Member Ineligible on Detail Date of Service	7,187	6.5%
1032	Billing Prov not Elig to Bill this Claim Type	5,958	5.4%
4407	Bnft Plan/Aid Categ Restriction for Cov Rev Code	5,944	5.4%
Totals		110,091	61.4%

Total Denied Details – 179,195

NOTE: Total # of top ten denials (110,091) divided by total denied details (179,195) = % of top ten denials (61.4%)

8.9 Monthly FFS Top Ten Suspense Reasons (By Detail Line)

Error	Description	Number of Failures	% of Top Ten
2001	Member ID Number not on File Recycle	5,324	41.8%
4405	Unable to Assign Provider Contract	2,004	15.8%
3305	Member Requires Valid PT Liability for DOS	1,713	13.5%
3001	PA Not Found on Database	272	2.1%
203	Recipient ID Number Missing	671	5.3%
2505	Member Covered by Private Insurance	610	4.8%
4014	No Pricing Segment on File	526	4.1%
5001	Exact Duplicate	447	3.5%
512	Filing Limit Exceeded	367	2.9%
2503	Member Covered by Medicare B	181	1.4%
Totals		12,730	75.3%

Total Suspended Details – 16,907

NOTE: Total # of top ten failures (12,730) divided by total suspended details (16,907) = % of top ten suspense(75.3%)

8.10 FFS Suspended Original Claims by Age (By Claim)

Category	September 2013		October 2013		November 2013		December 2013		January 2014		February 2014	
	Details	Pct.	Details	Pct.	Details	Pct.	Details	Pct.	Details	Pct.	Details	Pct.
0-30 days	10,660	90.43	14,773	96.58	12,110	94.53	10,383	93.59	8,149	91.49	11,364	94.52
31-60 days	827	7.02	192	1.26	238	1.86	229	2.06	137	1.54	76	.63
61-90 days	72	.61	36	.23	143	1.11	34	.31	168	1.89	58	.48
91+ days	229	1.94	295	1.93	320	2.50	448	4.04	453	5.08	525	4.37
Total	11,788		15,296		12,811		11,094		8,907		12,023	

8.11 FFS Claims Suspense Over 30 Days by Responsible Unit (By Claim)

Category	September 2013	October 2013	November 2013	December 2013	January 2014	February 2014	Oldest Julian Date
Resolutions	777	37	201	99	136	29	14-017
Med.Review	0	4	1	3	0	0	0
TPL	0	0	0	4	0	0	0
Adjustments	0	0	0	1	2	4	14-042
Recycle	0	0	0	7	0	0	0
DMS	351	482	499	597	620	626	12-117
Total	1,128	523	701	711	758	659	

9 Monthly Third-Party Liability

9.1 FFS Third-Party Liability Monthly Activity

Third Party Liability	Begin Inv	Received	Worked	To DMS	Ending Inventory	Oldest Date
PA40-Kames/Eligibles with Other Ins.	1,628	6,553	6,479	0	1,702	7 days
CS40-Child Support	0	948	948	0	0	0 days
SSI-Local Offices	0	0	0	0	0	0 days
TPL Edits	601	2,076	1,989	0	688	14days
Accident/Trauma Leads	0	2	2	0	0	0 days
DMS Attorney	0	0	0	0	0	0 days
RUSH Attorney	0	0	0	0	0	0 days
HP Attorney	3	200	201	0	2	0 days
TPL Checks	215	212	170	0	257	3 days
TPL Mail	2,160	6,503	7,398	0	1,265	7 days
KHIPP	0	337	337	0	0	0 days
Total	4,607	16,831	17,524	0	3,914	

10 Monthly Finance/Adjustments

10.1 Monthly FFS Financial – Accounts Receivable

Category	Beginning Inventory	Received	Keyed	Return to Provider	To DMS	On Hold	Ending Inventory	Age Oldest AR
Accounts Receivable Set-up	23	124	141	0	4	0	2	1 day
Payouts	6	371	377	0	0	0	0	0 days
Accounts Receivable Updates	4	45	48	0	0	0	1	1 day
Accounts Receivable Transfers	0	0	0	0	0	0	0	0 days
Total	33	540	566	0	4	0	3	

10.2 Monthly FFS Financial - Checks

Category	Beginning	Received	Completed	Ending	Age Oldest Check
Provider Warrant	18	0	2	16	1 day
HP Financial	212	484	500	196	1 day
DMS Financial	84	117	89	112	1 day
Total	314	601	591	324	

10.3 Monthly FFS Financial – Adjustments

Category	Beginning Inventory	Received	Completed	Returns	Ending Inventory	Age Oldest Adj
Professional	27	207	170	13	51	1 day
Institutional	39	130	130	13	26	1 day
Voids	32	251	239	11	33	1 day
Total	98	588	539	37	110	

10.4 Monthly FFS Financial - Mass Adjustments

Category	Beginning Inventory	Received (plus)	Released (minus)	Deleted (minus)	Zero Claims Pulled (minus)	Ending Inventory	On Hold	DMS Review
Mass Adjustment (region 52)	42	41	31	7	23	22	22	0
SE Processed Adjustment (region 58)	0	0	0	0	0	0	0	0
Total	42	41	31	7	23	22	22	0

11 Provider Relations

11.1 Provider Field Representatives

11.1.1 Provider Visits

February 3, 2014

Vicky Hicks, HP Provider Field Representative, held a face-to-face meeting with provider Christina McCoy, Certified Nurse Practitioner, on Monday, February 3, 2014 at the HP office. The provider stopped by to discuss her licensure information and ADO's. Vicky Hicks confirmed with Provider Enrollment that licensure information was received January 2014 and advised provider to ensure ADO is updated yearly.

February 4, 2014

Kelly Gregory, HP Provider Field Representative, conducted a Virtual Room provider visit on February 4, 2014, with The Ole Homeplace Adult Day. During this visit, the staff was taught how to navigate KyHealth Net by going over each subject in the drop down menus: claims, member, and prior authorizations.

Those in attendance were: Rena McCloud, Carson McCloud, Craig McCloud, Brandy Horn, and Bridget Compton.

February 27, 2014

Kelly Gregory, HP Provider Field Representative, conducted a Virtual Room provider visit on February 27, 2014, with Treasured Friends, LLC. During this visit, the staff was taught how to navigate KyHealth Net, find information and forms on www.kymmis.com and chfs.ky.gov.

Those in attendance were: Deedra Stanley and Shane Stanley.

11.2 Conference Calls (Calls Greater Than 30 Minutes)

February 14, 2014

Kelly Gregory, HP Provider Field Representative, conducted a conference call with Tennessee Cancer Specialist on February 14, 2014. The conference call was requested by the provider to go over claim denials, CMS1500 02/12 form and KyHealth Net. Attendees on conference call: Joye.

February 20, 2014

Kelly Gregory, HP Provider Field Representative, conducted a conference call with The Ole Homeplace Adult Day Health Care on February 20, 2014. The conference call was requested by the provider to go over claim denials, patient liability and prior authorizations. Attendees on conference call: Brandy.

11.3 Association Meetings

There are no association meetings to report.

11.4 Provider Contacts*

***Total Number of Calls and Emails between Provider Field Representatives and Providers during the Month**

Calls	223
Emails	387
Total	610

11.5 Provider Workshops

February 7, 2014

Kelly Gregory, HP Provider Field Representative, conducted a Hospital Presumptive Eligibility (PE) Webinar on February 7, 2014 from 9:30 a.m. to 10:30 a.m. There were two attendees logged into the virtual room. The webinar presentation introduced the objectives and benefits of PE. The webinar also included how the PE screenings and confirmation process works, and demonstrated the on-line provider entry form. Any additional provider questions were answered at the end of the presentation. Questions that could not be answered were submitted to DMS for follow-up. Also present was HP Provider Field Representative, Vicky Hicks.

February 14, 2014

Kelly Gregory, HP Provider Field Representative, conducted a Hospital Presumptive Eligibility (PE) Webinar on February 14, 2014 from 9:30 a.m. to 10:30 a.m. The webinar presentation introduced the objectives and benefits of PE. The webinar also included how the PE screenings and confirmation process works, and demonstrated the on-line provider entry form. There were two attendees logged into the virtual room.

February 21, 2014

Vicky Hicks, HP Provider Field Representative, conducted a Hospital Presumptive Eligibility (PE) Webinar on February 21, 2014 from 9:30 a.m. to 10:30 a.m. The webinar presentation introduced the objectives and benefits of PE. The webinar also included how the PE screenings and confirmation process works, and demonstrated the on-line provider entry form. There were seven attendees with one person logged into the virtual room sharing the presentation. Also present was HP Provider Field Representative, Kelly Gregory.

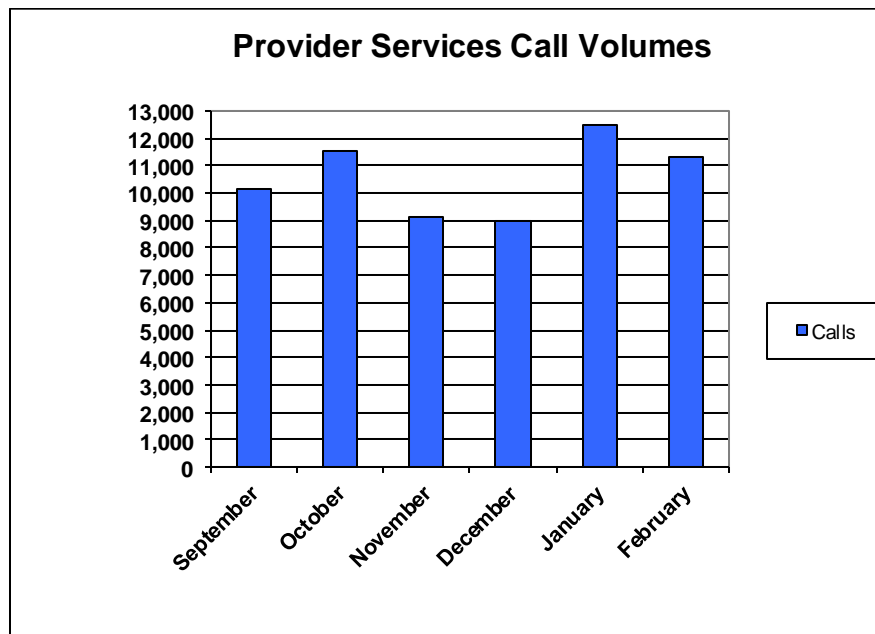
11.6 Provider Services

11.6.1 Provider Services

Category	September 2013	October 2013	November 2013	December 2013	January 2014	February 2014
% Service Level	95%	96%	97%	97%	95%	96%
Abandoned Calls	462	493	311	315	683	460
Avg Speed Ans	1:50	1:16	1:03	1:07	1:34	1:49
Incoming Calls	10,154	11,493	9,101	9,007	12,496	11,286
Paper Correspondence	700	666	568	344	421	504
E-Mail Correspondence	191	273	292	208	274	278
Fax	21	42	28	20	36	37
Total*	11,066	12,474	9,989	9,569	13,227	12,105
HP Callbacks	122	146	93	77	110	82

*Total of Calls, Paper Correspondence, E-Mail Correspondence, and Faxes

*Formula for % Service Level: 1.Number of incoming calls. 2. Subtract abandoned calls. 3. Divide total by number of incoming calls = percentage.



11.6.2 Top 5 Provider Calls

1. Claim Status
2. Member Services / Member Calls
3. Billing Help
4. Prior Authorization
5. Check Amounts

11.6.3 Notable Topics

1. Reason for claim denial or suspend. How to get the MCO to void the claim in order for Medicaid?
2. What is the MCO the member is enrolled in. MAP 552 questions. Member calls asking if enrolled in Medicaid, for which MCO they are enrolled and how to change the MCO.
3. Timely filing. CMS 1500 Crossover EOMB Form questions (is this form completed if Medicare pays or if Medicare denies).
4. Prior Authorization (PA) numbers and overlapping dates
5. Questions about the Attestation or enhanced checks

11.7 Commonwealth Training**11.7.1 Current Activities**

The following instructor-led training classes were offered by HP in February:

- Mechanics of Claims Processing (February 3) 1 attended
 - Parul Patel from OATS attended*
- Member Subsystem (February 5) 1 attended
 - Bill Waford from Division of Program Integrity – TPL Branch attended*
- Provider Subsystem (February 6) 0 attended
- Prior Authorization Subsystem (February 6) 0 attended
- Reference Subsystem (February 7) 5 attended
 - Judy Baker from Division of Program Quality and Outcomes attended*
 - Stephanie Bates from Division of Program Quality and Outcomes attended*
 - Uma Khanal from OATS attended*
 - Parul Patel from OATS attended*
 - Bikash Poudel from OATS attended*
- Claim Edits, Audits and Rules (February 7) 5 attended
 - Judy Baker from Division of Program Quality and Outcomes attended*
 - Stephanie Bates from Division of Program Quality and Outcomes attended*
 - Uma Khanal from OATS attended*
 - Parul Patel from OATS attended*
 - Bikash Poudel from OATS attended*

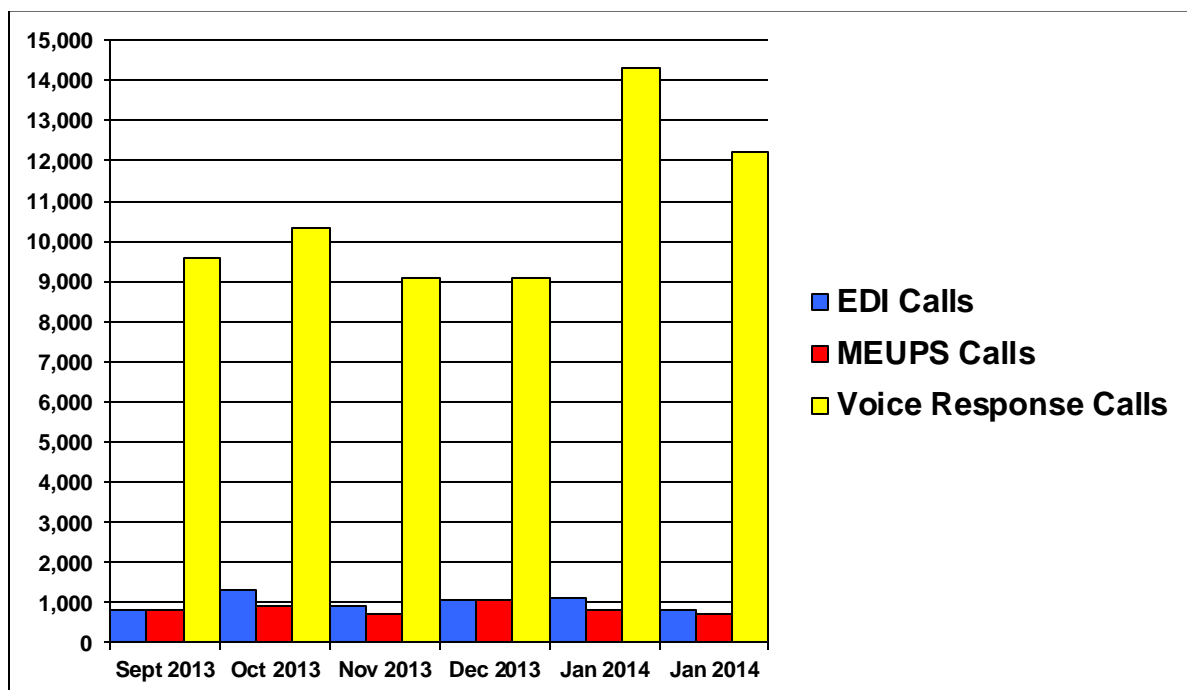
The following instructor-led training classes were offered by HP in February (continued):

- Claims Subsystem (February 10) 0 attended
- Financial Subsystem (February 12) 2 attended
 - Judy Baker from Division of Program Quality and Outcomes attended*
 - Stephanie Bates from Division of Program Quality and Outcomes attended*
- OnBase Application (February 12) 4 attended
 - Judy Baker from Division of Program Quality and Outcomes attended*
 - Stephanie Bates from Division of Program Quality and Outcomes attended*
 - Tracy Bentley from Division of Community Alternatives attended*
 - Bill Waford from Division of Program Integrity – TPL Branch attended*
- One-on-One Assistance (February 19) 0 attended

12 EDI Customer/Provider Interaction

12.1 Electronic Data Interchange Calls Received

Category	Sep 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014
EDI Calls	816	1,323	937	1,064	1,131	799
MEUPS Calls	826	921	740	1,053	832	714
Voice Response Calls	9,590	10,329	9,070	9,077	14,307	12,224



Expanded Call Data

Month	EDI Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
September	816	10	:07	2:58	99%
October	1,323	25	:13	2:58	98%
November	937	10	:09	2:52	99%
December	1,064	21	:11	2:52	98%
January	1,131	23	:13	3:19	98%
February	799	16	:10	2:57	98%

Month	MEUPS Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
September	826	17	:07	2:17	98%
October	921	16	:13	2:22	98%
November	740	10	:07	2:11	99%
December	1,053	16	:13	2:11	98%
January	832	18	:14	2:06	98%
February	714	16	:16	2:14	98%

Month	Voice Response Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
September	9,590	44	:01	1:35	99%
October	10,329	64	:01	1:37	99%
November	9,070	122	:01	1:34	99%
December	9,077	290	:01	1:31	97%
January	14,307	350	:01	1:29	98%
February	12,224	607	:01	1:30	95%

*Formula for % Service Level: 1.Number of incoming calls. 2. Subtract abandoned calls. 3. Divide total by number of incoming calls = percentage.

EDI Top 5 calls:

1. Request to repost 835s
2. Verify electronic file transmission
3. Request to repost 999s
4. Confirm setup of MAP 380s/246s
5. Questions about 837 file structure

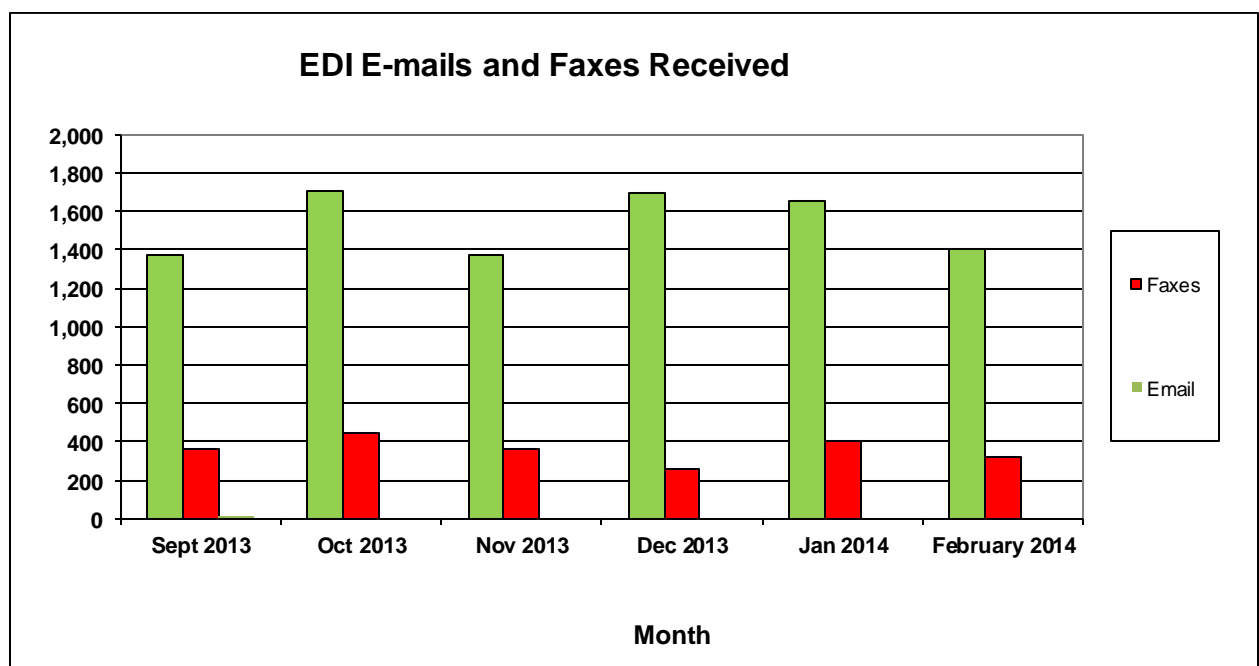
MEUPS Top 5 calls:

1. Password resets (*see table below*)
2. Request to change Administrator of account
3. PIN release request to set up new account
4. Medicaid contract has end-dated, resulting in no access to KyHealth Net
5. How to navigate member eligibility

Category	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014
Password Resets Received Via phone	547	668	538	952	624	468

12.2 EDI E-mails and Faxes Received

Category	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014
E-mails Received	1,377	1,710	1,376	1,693	1,650	1400
E-mails Answered	1,377	1,710	1,376	1,693	1,650	1400
Faxes Received	366	443	360	257	401	321
Faxes Answered	366	443	360	257	401	321



EDI Top 5 E-mail Requests:

1. Password resets (*see table below*)
2. Status of MAP 380
3. Status of 835
4. Research
5. Verify electronic file transmission

Category	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014
Password Resets Received Via e-mail	428	513	324	747	413	371

EDI Top 5 Fax Requests:

1. PIN release forms* (*see table below*)
2. Change of Administrator forms* (*see table below*)
3. MAP 380s and 246s
4. 835s
5. Trading Partner Agreements

Category	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014
PINs Received via fax	454	614	488	116	899**	182
Admins Received via fax	237	343	236	163	195	160

*All PIN release and Change of Administrator responses are outbound via e-mail only.

** Many providers set up accounts in KyHealth Net in response to the EADO letter.